

**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
**(Schedule E)**

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 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>FEDUP POLITICAL ACTION COMMITTEE AKA FEDUP PAC</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00455923	
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input checked="" type="checkbox"/> Amends report filed on		<div style="display: flex; justify-content: space-around;"> <div>MM / DD / YYYY 11 / 04 / 2016</div> </div>	

Full Name of Payee <b>American Target Advertising</b>			Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 31 / 2016		
Mailing Address 9625 Surveyor Court Suite 400			Amount 0.96		
City Manassas	State VA	Zip Code 20110	Transaction ID : SE.8700		
Purpose of Expenditure Bumper Sticker Fulfillment		Category/ Type 001	Date of Disbursement or Obligation MM / DD / YYYY 10 / 31 / 2016		
Name of Federal Candidate CLINTON, HILLARY RODHAM, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____		
Calendar Year-To-Date Per Election for Office Sought 77680.41			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		

Full Name of Payee <b>American Target Advertising</b>			Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 31 / 2016		
Mailing Address 9625 Surveyor Court Suite 400			Amount 112.97		
City Manassas	State VA	Zip Code 20110	Transaction ID : SE.8701		
Purpose of Expenditure Postage, envelopes, paper for mailing		Category/ Type 001	Date of Disbursement or Obligation MM / DD / YYYY 10 / 31 / 2016		
Name of Federal Candidate CLINTON, HILLARY RODHAM, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____		
Calendar Year-To-Date Per Election for Office Sought 77793.38			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	113.93
(b) SUBTOTAL of Unitemized Independent Expenditures .....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Doe, Donna, , ,

[Electronically Filed]

Date

 MM / DD / YYYY  
 11 / 04 / 2016

Signature